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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

rt 1:	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
You	r full name		
your	government-issued are identification (for	Quincy First name	First name
		Middle name	Middle name
iden	tification to your	Rollins Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
your num Indi	r Social Security aber or federal vidual Taxpayer tification number	xxx-xx-7674	
	You Write your pictu exar licen Bring iden mee	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	About Debtor 1: Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Rollins Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number XXX-XX-7674

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Debtor 1 Quincy D. Rollins

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)
	doing business as names	business name(s)	Dusiness fiditie(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		1913 Willis Road North Chesterfield, VA 23237	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Chesterfield	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Quincy D. Rollins

Case number (if known)

Par	t 2: Tell the Court About	Your B	Bankruptcy Ca	se			
7.	The chapter of the Bankruptcy Code you are				of each, see Notice Required by page 1 and check the appropria	11 U.S.C. § 342(b) for Individuals Filing for Bank te box.	kruptcy
	choosing to file under	■ C	hapter 7				
		Πс	Chapter 11				
		□с	Chapter 12				
		□с	Chapter 13				
3.	How you will pay the fee		about how yo	u may pay. Typ attorney is subr	ically, if you are paying the fee y	ck with the clerk's office in your local court for mo ourself, you may pay with cash, cashier's check, half, your attorney may pay with a credit card or c	or money
					tallments. If you choose this opti s (Official Form 103A).	on, sign and attach the Application for Individuals	s to Pay
						on only if you are filing for Chapter 7. By law, a jud	
						our income is less than 150% of the official pover in installments). If you choose this option, you mu	
						cial Form 103B) and file it with your petition.	
).	Have you filed for bankruptcy within the	■ No					
	last 8 years?	□ Ye					
			District			Case number	
			District		When		
			District		When	Case number	
10.	Are any bankruptcy	■ No	0				
	cases pending or being filed by a spouse who is	□ Ye	es.				
	not filing this case with you, or by a business partner, or by an affiliate?						
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11	Do you rent your		o Go to li	ine 12			
٠	residence?	□ N(singd on aviation judgment again	et vou?	
		■ Ye	es.		ained an eviction judgment again	si you:	
				No. Go to line	12.		
				Yes. Fill out Initial bankruptcy pet		Judgment Against You (Form 101A) and file it wi	ith this

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Case number (if known) Debtor 1 Quincy D. Rollins

ar	Report About Any Bu	sinesses `	You Own	as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of busi	ness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	e & ZIP Code
	it to this petition.		Check	the appropriate box	c to describe your business:
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you in s, cash-flo	dicate that you are a ow statement, and fe	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am n	ot filing under Chap	ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fi	ling under Chapter 1	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
ar	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	Yes.	What is t	he hazard?	
	public health or safety? Or do you own any property that needs			iate attention is	
	immediate attention?		needed,	why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
					Number, Street, City, State & Zip Code

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Debtor 1 Quincy D. Rollins

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 48 Case number (if known) Debtor 1 **Quincy D. Rollins** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Quincy D. Rollins Signature of Debtor 2 Quincy D. Rollins Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on March 14, 2019

MM / DD / YYYY

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Debtor 1 Quincy D. Rollins

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Pia J. N	North	Date	March 14, 2019	
Signature of	f Attorney for Debtor		MM / DD / YYYY	
Pia J. Nor	th 29672			
North Law	/ Bar# 29672			
	our Park Drive 1, VA 23112			
Number, Street,	City, State & ZIP Code			
Contact phone	(804) 739-3700	Email address	Help@PiaNorth.com	
29672 VA				
Bar number & S	Itate			

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		17(7(1)))	$A \cap A \cap A \cap A \rightarrow A \cap A \cap A \cap A \cap A \cap A \cap $	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Quincy D. Rollins	S		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF VIRGINIA	
Case number (if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	1,221.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,221.00
Pai	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	1,337.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	16,748.00
	Your total liabilities	\$	18,085.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,100.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,331.00
Paı	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your	ır other sch	edules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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Case number (if known) Document

Debtor 1 Quincy D. Rollins

8. F	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	١.	
12	22A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$_	

433.38

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		ur case and this filing:		
Fill in this infor	rmation to identify yo			
Debtor 1	Quincy D. Rolli	ins		
20210	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the	e: EASTERN DISTRICT OF	VIRGINIA	
Cooo number				
Case number				☐ Check if this is an amended filing
				amended ming
~ . _	/=			
Official Fo	orm 106A/B			
Schedu	le A/B: Pro	pertv		12/15
		<u> </u>	ce. If an asset fits in more than one category, list	the asset in the category where you
think it fits best.	Be as complete and according as a complete a	urate as possible. If two married	people are filing together, both are equally respo . On the top of any additional pages, write your na	nsible for supplying correct
		ling, Land, or Other Real Estate	You Own or Have an Interest In	
1. Do you own or	have any legal or equita	able interest in any residence, bu	uilding, land, or similar property?	
No. Go to Pa	art 2.			
☐ Yes. Where	is the property?			
5				
Do you own, lea			cles, whether they are registered or not? Inc	
Do you own, lea someone else dr	ase, or have legal or erives. If you lease a veh		e G: Executory Contracts and Unexpired Lease	
Do you own, leasomeone else dr	ase, or have legal or erives. If you lease a veh	nicle, also report it on Schedule	e G: Executory Contracts and Unexpired Lease	
Do you own, leasomeone else dr 3. Cars, vans, t	ase, or have legal or erives. If you lease a veh	nicle, also report it on Schedule	e G: Executory Contracts and Unexpired Lease	
Do you own, leasomeone else dr 3. Cars, vans, t	ase, or have legal or erives. If you lease a veh	nicle, also report it on Schedule	e G: Executory Contracts and Unexpired Lease	
Do you own, leasomeone else dr 3. Cars, vans, t No Yes 4. Watercraft, a	ase, or have legal or e rives. If you lease a veh rucks, tractors, sport	nicle, also report it on Schedules utility vehicles, motorcycles , ATVs and other recreationa	e G: Executory Contracts and Unexpired Lease	
Do you own, leasomeone else dr 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Box	ase, or have legal or e rives. If you lease a veh rucks, tractors, sport	nicle, also report it on Schedules utility vehicles, motorcycles , ATVs and other recreationa	e G: Executory Contracts and Unexpired Lease s Il vehicles, other vehicles, and accessories	
Do you own, leasomeone else dr 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Bos	ase, or have legal or e rives. If you lease a veh rucks, tractors, sport	nicle, also report it on Schedules utility vehicles, motorcycles , ATVs and other recreationa	e G: Executory Contracts and Unexpired Lease s Il vehicles, other vehicles, and accessories	
Do you own, leasomeone else dr 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Box	ase, or have legal or e rives. If you lease a veh rucks, tractors, sport	nicle, also report it on Schedules utility vehicles, motorcycles , ATVs and other recreationa	e G: Executory Contracts and Unexpired Lease s Il vehicles, other vehicles, and accessories	
Do you own, leasomeone else dr 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Bos	ase, or have legal or e rives. If you lease a veh rucks, tractors, sport	nicle, also report it on Schedules utility vehicles, motorcycles , ATVs and other recreationa	e G: Executory Contracts and Unexpired Lease s Il vehicles, other vehicles, and accessories	
Do you own, leasomeone else dr 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Box No Yes	ase, or have legal or erives. If you lease a vehores, tractors, sport sp	nicle, also report it on Schedules utility vehicles, motorcycles ATVs and other recreational ersonal watercraft, fishing vess	e G: Executory Contracts and Unexpired Lease s Il vehicles, other vehicles, and accessories	es.
Do you own, leasomeone else dr 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Box No Yes	ase, or have legal or e rives. If you lease a vel rucks, tractors, sport hircraft, motor homes, ats, trailers, motors, pe	nicle, also report it on Schedules utility vehicles, motorcycles ATVs and other recreational ersonal watercraft, fishing vession you own for all of your ent	e G: Executory Contracts and Unexpired Lease s al vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories	\$0.00
Do you own, leasomeone else dr 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Box No Yes	ase, or have legal or e rives. If you lease a vel rucks, tractors, sport hircraft, motor homes, ats, trailers, motors, pe	nicle, also report it on Schedules utility vehicles, motorcycles ATVs and other recreational ersonal watercraft, fishing vession you own for all of your ent	e G: Executory Contracts and Unexpired Lease I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories tries from Part 2, including any entries for	¢o.00
Do you own, leasomeone else dr 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Box No Yes 5 Add the doll pages you h	ase, or have legal or erives. If you lease a vehives. If you lease a vehives, tractors, sport nucks, tractors, sport nircraft, motor homes, ats, trailers, motors, period lar value of the portion have attached for Partie Your Personal and Ho	nicle, also report it on Schedules utility vehicles, motorcycles ATVs and other recreational ersonal watercraft, fishing vession you own for all of your end 2. Write that number here	e G: Executory Contracts and Unexpired Leases al vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories aries from Part 2, including any entries for	=> \$0.00
Do you own, leasomeone else dr 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Box No Yes 5 Add the doll pages you h	ase, or have legal or erives. If you lease a vehives. If you lease a vehives, tractors, sport nucks, tractors, sport nircraft, motor homes, ats, trailers, motors, period lar value of the portion have attached for Partie Your Personal and Ho	nicle, also report it on Schedules utility vehicles, motorcycles and other recreational ersonal watercraft, fishing vession you own for all of your enter 2. Write that number here	e G: Executory Contracts and Unexpired Leases al vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories aries from Part 2, including any entries for	\$0.00
Do you own, leasomeone else dr 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Box No Yes 5 Add the doll pages you h Part 3: Describe Do you own or	ase, or have legal or erives. If you lease a vehices. If you lease a vehices, tractors, sport arctaft, motor homes, ats, trailers, motors, period ave attached for Particle Your Personal and How have any legal or equipoods and furnishings	anicle, also report it on Schedules utility vehicles, motorcycles at utility vehicles, motorcycles at ATVs and other recreational ersonal watercraft, fishing vession you own for all of your enterest. Write that number here busehold Items uitable interest in any of the	e G: Executory Contracts and Unexpired Leases al vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories aries from Part 2, including any entries for	\$0.00 Current value of the portion you own? Do not deduct secured
Do you own, leasomeone else dr 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Box No Yes 5 Add the doll pages you h Part 3: Describe Do you own or 6. Household g Examples: M No	ase, or have legal or erives. If you lease a vehices. If you lease a vehices, tractors, sport directions, tractors, sport directions, trailers, motors, per lar value of the portionave attached for Partice Your Personal and Hothave any legal or equipoods and furnishings lajor appliances, furnitudes.	nicle, also report it on Schedule truitity vehicles, motorcycles and other recreational ersonal watercraft, fishing vession you own for all of your enter 2. Write that number here	e G: Executory Contracts and Unexpired Leases al vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories aries from Part 2, including any entries for	\$0.00 Current value of the portion you own? Do not deduct secured
Do you own, leasomeone else dr 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Box No Yes 5 Add the doll pages you h Part 3: Describe Do you own or 6. Household g Examples: M	ase, or have legal or erives. If you lease a vehices. If you lease a vehices, tractors, sport directions, tractors, sport directions, trailers, motors, per lar value of the portionave attached for Partice Your Personal and Hothave any legal or equipoods and furnishings lajor appliances, furnitudes.	anicle, also report it on Schedules utility vehicles, motorcycles at utility vehicles, motorcycles at ATVs and other recreational ersonal watercraft, fishing vession you own for all of your enterest. Write that number here busehold Items uitable interest in any of the	e G: Executory Contracts and Unexpired Leases al vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories aries from Part 2, including any entries for	\$0.00 Current value of the portion you own? Do not deduct secured
Do you own, leasomeone else dr 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Box No Yes 5 Add the doll pages you h Part 3: Describe Do you own or 6. Household g Examples: M No	ase, or have legal or erives. If you lease a vehices. If you lease a vehices, tractors, sport nucks, tractors, sport nucks, tractors, sport nucks, trailers, motors, period at a value of the portion nave attached for Part nucks and furnishings and furnishings and spoods and furnishings and spoods and furnishings and poods and furnishings and spoods and furnishings are poods.	anicle, also report it on Schedules utility vehicles, motorcycles at utility vehicles, motorcycles at ATVs and other recreational ersonal watercraft, fishing vession you own for all of your enterest. Write that number here busehold Items uitable interest in any of the	e G: Executory Contracts and Unexpired Leases al vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories aries from Part 2, including any entries for	Current value of the portion you own? Do not deduct secured

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

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Debtor 1	Quincy D. Rollin	Document Page 11	of 48 Case number (if known)	
	La	otop & cell phone		\$200.00
Exam		nes; paintings, prints, or other artwork; books, pictures, onemorabilia, collectibles	or other art objects; stamp, coin,	or baseball card collections;
	Вс	oks		\$10.00
Exam No ☐ Yes 10. Firea Exan ☐ No ☐ Yes 11. Cloth Exan ☐ No	musical instrumer s. Describe rms mples: Pistols, rifles, sho s. Describe	nic, exercise, and other hobby equipment; bicycles, pool t	ables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
■ Yes		othes		\$150.00
■ No □ Yes 13. Non- Exar □ No	mples: Everyday jewelry s. Describe farm animals mples: Dogs, cats, birds s. Describe	costume jewelry, engagement rings, wedding rings, heir horses	rloom jewelry, watches, gems, g	old, silver \$40.00
	[21	logs		
■ No □ Yes	s. Give specific informa	of your entries from Part 3, including any entries for	pages you have attached	\$600.00
tor	ਮਕਾਰ 3. Write that num	per here		
	Describe Your Financial A Down or have any legal	ssets or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash Exar		in your wallet, in your home, in a safe deposit box, and or	n hand when you file your petitio	on

☐ No

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Case number (if known) Document

Debtor 1 **Quincy D. Rollins**

			Cash - Approx.	\$1.00
institutio	/ ng, savings, or other financial accour ons. If you have multiple accounts w		n credit unions, brokerage houses,	and other similar
□ No ■ Yes		Institution name:		
– res		(1) Square account \$50 (detailing work)	Earnings from	
	17.1. Bank Account	(2)Capital One Checking 7439 in the name of Betty Debtor's name is not on but he has his business into this account. The demoney in this account af	y Bitts - \$300 this bank account income deposited btor has \$300 of his bebtor intends to get	\$300.00
	nds, or publicly traded stocks ands, investment accounts with broke	erage firms, money market accoun	ts	
☐ Yes	Institution or issuer na	ime:		
joint venture ☐ No	ed stock and interests in incorpora	·	sses, including an interest in an L	.LC, partnership, and
■ Yes. Give specifi	c information about them Name of entity:		% of ownership:	
	business. The busine	s, a car detailing service ess has an inconsequential ousiness and its only value		Unknowr
Negotiable instrum Non-negotiable ins ■ No	corporate bonds and other negotial sents include personal checks, cashing truments are those you cannot transcript information about them Issuer name:	ers' checks, promissory notes, and	money orders.	
21. Retirement or pene Examples: Interest: ■ No □ Yes. List each acc	s in IRA, ERISA, Keogh, 401(k), 403 count separately.		er pension or profit-sharing plans	
	Type of account:	Institution name:		
	and prepayments nused deposits you have made so the lents with landlords, prepaid rent, pu			others
☐ Yes		Institution name or individual:		
23. Annuities (A contra	act for a periodic payment of money Issuer name and description.	to you, either for life or for a number	er of years)	
	·	Jittia d ADI E	munifical assts totals	
	cation IRA, in an account in a qua (1), 529A(b), and 529(b)(1).	iiiīied ABLE program, or under a	qualified state tuition program.	

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1	Quincy D. Rollins	Document	Page 13 of 48_{C}	ase number (if known)	
■ No					
	Institution name ar	nd description. Separately file	the records of any interes	sts.11 U.S.C. § 521(c):	
_	s, equitable or future interests in	property (other than anythi	ng listed in line 1), and	rights or powers exercis	sable for your benefit
■ No □ Yes	. Give specific information about t	nem			
	nts, copyrights, trademarks, trade			S	
■ No	. Give specific information about t	,			
	ses, franchises, and other gener				
Exan ■ No	nples: Building permits, exclusive li	censes, cooperative association	on holdings, liquor license	es, professional licenses	
	Give specific information about the specific information	nem			
Money o	r property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax re □ No	efunds owed to you				
_	. Give specific information about th	em, including whether you alr	eady filed the returns and	d the tax years	
					-
		ALL Federal and State Including Tax year years. Debtor is no	2018 and all prior t required to file		
		Federal or Virginia for Tax years 2017 he hasn't earned e	and 2018 because	Federal & State	Unknown
29. Famil	y support nples: Past due or lump sum alimor	ny engueal cupport, child cupp	port maintanance divers	o cottlement, property cot	tlomont
■ No	ipies. Past due of fump sum allimor	iy, spousai support, criliu supp	ont, maintenance, divorc	e settlement, property set	uemeni
☐ Yes	. Give specific information				
	amounts someone owes you apples: Unpaid wages, disability insu		nefits, sick pay, vacation	pay, workers' compensat	ion, Social Security
■ No	benefits; unpaid loans you m	nade to someone else			
	. Give specific information				
	ests in insurance policies apples: Health, disability, or life insur	rance; health savings account	(HSA); credit, homeowne	er's, or renter's insurance	
■ Yes	. Name the insurance company of				
	Company r	name:	Beneficiary	/ :	Surrender or refund value:
		all life insurance policies or is listed as a beneficiar			Unknown
If you	nterest in property that is due yo	u from someone who has di	hei		
_	are the beneficiary of a living trust cone has died.			urrently entitled to receive	property because
■ No	are the beneficiary of a living trust			urrently entitled to receive	property because

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Debtor 1			Doc 1	Filed 03/14/ Document		Entered 03/14 e 14 of 48	/19 17:54:45 number (if known)	Desc Main
			r or not vou	, have filed a lawsu	it or me			
_Exa	mples: Accidents, en					ade a demand for pa	lyment	
□ No	o es. Describe each cla	aim						
	.s. Describe each cir	a						
			NO Poter	itial claims or lav	/suits			Unknown
34 Othe	er contingent and u	nliquidated c	laims of ev	erv nature includir	a coun	terclaims of the dek	otor and rights to se	t off claims
■ No	=	iiiquiuuteu e	namino or ev	ory mataro, moraum	g coun	terolumb or the dec	nor und rights to so	t on olumb
□ Ye	es. Describe each cla	aim						
_ `	financial assets yo	u did not alre	eady list					
■ No □ Ye	o es. Give specific info	rmation						
	·							
						ies for pages you ha		\$301.00
Part 5:	Describe Any Busines	s-Related Pro	perty You Ow	n or Have an Interest	In. List a	any real estate in Part	1.	
	ou own or have any leg Go to Part 6.	gal or equitable	e interest in a	ny business-related p	roperty	?		
_	. Go to line 38.							
								Current value of the
								Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Acc	ounts receivable or	commission	s you alread	dy earned				
■ No								
⊔ Ye	es. Describe							
Exa	•			modems, printers, c	opiers, f	fax machines, rugs, te	elephones, desks, ch	airs, electronic devices
	ĺ	Pressure V	Vasher \$30)				
		Vacuum \$3	30					
		Polisher \$2 Polisher \$2	200					****
		Rags, cher	nicals, tow	rels, buckets, ho	se, gas	s can \$10		\$320.00
40. Mac	hinery, fixtures, equ	ıipment, sup	plies you us	se in business, and	tools o	of your trade		
	es. Describe							
41. Inve	•							
■ No	o es. Describe							
ப 16	DESCHINE							
42. Inter	rests in partnership	s or joint ver	ntures					

Official Form 106A/B Schedule A/B: Property

% of ownership:

 $\hfill \Box$ Yes. Give specific information about them...... Name of entity:

■ No

page 5

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Debi	or 1 Quincy D. Rollins		Case number (if known)	
	customer lists, mailing lists, or other compilations			
	No.			
	Do your lists include personally identifiable information (as defined in	11 U.S.C. § 101(41A))?		
	■ No			
	☐ Yes. Describe			
44. A	any business-related property you did not already list			
	No			
	Yes. Give specific information			
45.	Add the dollar value of all of your entries from Part 5, including			\$220.00
	for Part 5. Write that number here		······	\$320.00
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46. C	o you own or have any legal or equitable interest in any farm	- or commercial fishin	ng-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
	As you have ather measure of any kind you did not already list			
	Oo you have other property of any kind you did not already list Examples: Season tickets, country club membership	i f		
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write the	nat number here	·····	\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$600.00		
58.	Part 4: Total financial assets, line 36	\$301.00		
59.	Part 5: Total business-related property, line 45	\$320.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$1,221.00	Copy personal property total	\$1,221.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$1,221.00

Official Form 106A/B Schedule A/B: Property page 6

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		170.0.11111.	I (IIII. IV (II 4	()
Fill in this infor	rmation to identify your	case:		
Debtor 1	Quincy D. Rollins	S		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Household Goods Line from Schedule A/B: 6.1	\$200.00		\$200.00	Va. Code Ann. § 34-26(4a)
Ellie Helli Goriodale 702.			100% of fair market value, up to any applicable statutory limit	
Laptop & cell phone	\$200.00		\$200.00	Va. Code Ann. § 34-26(4a)
Ellie Holli Geriedale AVD. 1.1			100% of fair market value, up to any applicable statutory limit	
Books Line from Schedule A/B: 8.1	\$10.00		\$10.00	Va. Code Ann. § 34-26(4a)
Line non ochedale A/D. G.1			100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B: 11.1	\$150.00		\$150.00	Va. Code Ann. § 34-26(4)
Elic Holl Golfeddie AVD. 11.1			100% of fair market value, up to any applicable statutory limit	
2 Dogs Line from Schedule A/B: 13.1	\$40.00		\$40.00	Va. Code Ann. § 34-26(5)
Ellie Holli Geriedale AVD. 19.1			100% of fair market value, up to any applicable statutory limit	
			,	

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption	
Cash - Approx. Line from Schedule A/B: 16.1	\$1.00	■	\$1.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
Bank Account: (1) Square account \$50 (Earnings from detailing work)	\$300.00		\$350.00	Va. Code Ann. § 34-4
(2)Capital One Checking Account ending 7439 in the name of Betty Bitts - \$300 Debtor's name is not on this bank account but he has his business income deposited into this account. The Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
Bank Account: (1) Square account \$50 (Earnings from detailing work)	\$300.00		\$262.50	Va. Code Ann. § 34-29
(2)Capital One Checking Account ending 7439 in the name of Betty Bitts - \$300 Debtor's name is not on this bank account but he has his business income deposited into this account. The Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
RC Auto Finish LLC, aka, Ride Clean	Unknown		\$1.00	Va. Code Ann. § 34-4
Auto The Debtor's business, a car detailing service business. The business has an inconsequential value. It is a service business and its only value is in the Debtor's services. 100% Line from Schedule A/B: 19.1			100% of fair market value, up to any applicable statutory limit	
Federal & State: ALL Federal and	Unknown		\$1.00	Va. Code Ann. § 34-4
State Tax refunds: Including Tax year 2018 and all prior years. Debtor is not required to file Federal or Virginia State tax returns for Tax years 2017 and 2018 because he hasn't earned enough. Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
Any and all life insurance policies	Unknown			Va. Code Ann. § 38.2-3122
that the debtor is listed as a beneficiary. Line from Schedule A/B: 31.1		•	100% of fair market value, up to any applicable statutory limit	100% of Fair Market Value
Pressure Washer \$30	\$320.00		\$320.00	Va. Code Ann. § 34-26(7)
Vacuum \$30 Polisher \$50 Polisher \$200 Rags, chemicals, towels, buckets, hose, gas can \$10 Line from Schedule A/B: 39.1			100% of fair market value, up to any applicable statutory limit	

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Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)								
No								
Yes.	Did you acquire the property covered by the exemption within 1,215 days before you filed this case?							
	No							
	Yes							

Case 19-	31300-KLF	Doc i Filed 03/14/19 Effet Document Page 19	nf //8	7.54.45 Desc	Walli
Fill in this information	າ to identify yoເ		(7) - (7		
Debtor 1 Q	uincy D. Rolliı	าร			
	st Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing) Firs	st Name	Middle Name Last Name			
United States Bankrup	tcy Court for the:	EASTERN DISTRICT OF VIRGINIA			
Case number					
(if known)					if this is an led filing
Official Form 10					
Schedule D:	Creditors	Who Have Claims Secured	by Property	<u>y</u>	12/15
		If two married people are filing together, both are equout, number the entries, and attach it to this form. On			
1. Do any creditors have	•				
☐ No. Check this t	oox and submit t	his form to the court with your other schedules. You	u have nothing else to	o report on this form.	
Yes. Fill in all of	the information	below.			
Part 1: List All Sec	ured Claims			0.1	0.1
for each claim. If more that	an one creditor has	more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Affirm Inc		Describe the property that secures the claim:	\$1,337.00	Unknown	Unknown
Creditor's Name		Custom Rims, Tires and exhaust pipe. Car was repossessed by Connects Federal Credit Union and debtor no longer has possession of the vehicle.			
650 California	St FI 12	As of the date you file, the claim is: Check all that apply.			
San Francisco	, CA 94108	Contingent			
Number, Street, City, S	tate & Zip Code	Unliquidated			
Who owes the debt? C	heck one	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only	nook ono.	☐ An agreement you made (such as mortgage or secu	ıred		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the deb	=	☐ Judgment lien from a lawsuit			
☐ Check if this claim re community debt	lates to a	Other (including a right to offset)			
Date debt was incurred	Opened 04/18 Last Active 8/18/18	Last 4 digits of account number DB7Q			
Add the deller of		aliman A an dhia mana Mais dha an dhi	64.00	7.00	
	•	olumn A on this page. Write that number here: the dollar value totals from all pages.	\$1,33		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$1,337.00

Write that number here:

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Debtor 1	Quincy D. Rollins	3		Case number (if known)	
	First Name	Middle Name	Last Name		
A A P	ame, Number, Street, City, ffirm Inc ffirm Incorporated o Box 720 an Francisco, CA 9	·		On which line in Part 1 did you enter Last 4 digits of account number	the creditor? 2.1

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	Odoc	10 01000 REI		Document	Page 2	1 of 48	7-1-10	Desc Man
Fill in	this inform	ation to identify your c	ase:					
Debto	or 1	Quincy D. Rollins						
		First Name	Middle Na	ame	Last Name			
Debto		First Name	Middle Na		Loot Name			
(Spouse	e if, filing)	First Name	Middle Na	ame	Last Name			
United	d States Ban	kruptcy Court for the:	EASTERN D	DISTRICT OF VI	RGINIA			
Case	number							
(if know				_				Check if this is an
								amended filing
٠	ial Eama	4005/5						
		<u>106E/F</u>						40/45
		F: Creditors W				Part 2 for creditors with NON		12/15
ichedu ichedu eft. Att ame a	ule G: Execut ule D: Credito ach the Cont and case num	ory Contracts and Unexpi ors Who Have Claims Secu inuation Page to this page ober (if known).	red Leases (Of ired by Properi e. If you have n	fficial Form 106G). ty. If more space i no information to r	. Do not include is needed, copy	contracts on Schedule A/B: P any creditors with partially s the Part you need, fill it out, r do not file that Part. On the to	ecured claim number the e	s that are listed in ntries in the boxes on the
Part 1		of Your PRIORITY Uns						
_		rs have priority unsecured	l claims agains	it you?				
_	No. Go to Pa	art 2.						
	Yes.	NONDOLODIT	,,,					
Part 2		of Your NONPRIORITY						
		rs have nonpriority unsecu	_	•				
	No. You hav	e nothing to report in this pa	rt. Submit this f	orm to the court wit	th your other sche	edules.		
	Yes.							
un tha	secured claim	, list the creditor separately	for each claim.	For each claim list	ed, identify what t	b holds each claim. If a credito type of claim it is. Do not list cla three nonpriority unsecured cla	ims already ir	ncluded in Part 1. If more
								Total claim
4.1		s Federal Credit Uni Creditor's Name	on	Last 4 digits of ac	ccount number	1001		\$11,048.00
						Opened 03/18 Last A	ctive	
		rader Road nd, VA 23228		When was the de	ebt incurred?	07/18		_
		reet City State Zip Code		As of the date yo	u file, the claim i	is: Check all that apply		
	Who incur	red the debt? Check one.		-				
	☐ Debtor	1 only		☐ Contingent				
	Debtor :	2 only		☐ Unliquidated				
	☐ Debtor	1 and Debtor 2 only		□ Disputed				
	At least	one of the debtors and another		Type of NONPRIC	ORITY unsecured	d claim:		
		if this claim is for a comm		\square Student loans				
	debt		•			aration agreement or divorce the	at you did not	
		n subject to offset?		report as priority cl				
	No			■ Debts to pension	-	ng plans, and other similar debt		
	☐ Yes			Other. Specify	2014 Ford I 2018	Mustang - Repossesse	d July	

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Case number (if known)

Debtor 1 Quincy D. Rollins ase number (if known) 4.2 \$500.00 **Elephant Auto Ins.** Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 75658 When was the debt incurred? Baltimore, MD 21275 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 Franklin Street Development 3 Last 4 digits of account number 7674 \$2,400.00 Nonpriority Creditor's Name 410 Hancock Street When was the debt incurred? **Unit 110** Richmond, VA 23220 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Judgment March 2018 ☐ Yes 4.4 **Great Richmond Rentals** 7674 \$1,300.00 Last 4 digits of account number Nonpriority Creditor's Name 2000 West Club Lane When was the debt incurred? Richmond, VA 23226 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Judgment 11/2015 ☐ Yes

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4.5	St Mary's Hospital Nonpriority Creditor's Name	Last 4 digits of account number 7674	\$1,000.00
	P.O. Box 1838 Columbus, OH 43216	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Medical	
4.6	Union First Market Bank	Last 4 digits of account number	\$500.00
7.0	Nonpriority Creditor's Name		φ300.00
	PO Box 940 Ruther Glen, VA 22546	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Overdrawn Account	
4.7	Wholesales Direct Auto Sales Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	12944 Jefferson Avenue Newport News, VA 23608	When was the debt incurred? 2017	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Account balance for totalled vehicle	
Part 3:	List Others to Be Notified About a De	bt That You Already Listed	
is tryi have	ng to collect from you for a debt you owe to so	about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, omeone else, list the original creditor in Parts 1 or 2, then list the collection agency h at you listed in Parts 1 or 2, list the additional creditors here. If you do not have additi or submit this page.	ere. Similarly, if you
Name a	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
		Line 4.5 of (Check one):	3
P.O. E	3ox 28538	Part 2: Creditors with Nonpriority Unsecured Cla	aims

Official Form 106 E/F

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Quincy D. Rollins		Case number (if known)	
Richmond, VA 23228	Last 4 digits of account number		
Name and Address Dankos, Gordon & Tucker 1360 E Parham Rd Henrico, VA 23228	On which entry in Part 1 or Part 2 Line 4.4 of (<i>Check one</i>):	did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Dodson Property Management 409 E Main St, Ste 301 Richmond, VA 23219	On which entry in Part 1 or Part 2 Line 4.3 of (<i>Check one</i>):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Edward S. Whitlock 10160 Staples Mill Road Suite 105 Glen Allen, VA 23060	On which entry in Part 1 or Part 2 Line 4.1 of (<i>Check one</i>):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
, <u>-</u>	Last 4 digits of account number		
Name and Address KRS Holdings 1904 Byrd Ave #308 Richmond, VA 23230	On which entry in Part 1 or Part 2 Line 4.4 of (<i>Check one</i>):	did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims	
*	Last 4 digits of account number		
Name and Address Receivable Management PO Box 8630 Richmond, VA 23226	On which entry in Part 1 or Part 2 Line 4.2 of (<i>Check one</i>):	did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims	
·	Last 4 digits of account number		
Name and Address Receivable Management Inc 7206 Hull Rd Ste 211 Richmond, VA 23235	On which entry in Part 1 or Part 2 Line 4.2 of (<i>Check one</i>):	did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims	
•	Last 4 digits of account number		
Name and Address William K. Dove, II & Assoc. 14070 Brookman Rd	On which entry in Part 1 or Part 2 Line 4.3 of (<i>Check one</i>):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Somerset, VA 22972	Last 4 digits of account number		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim
6f.	Student loans	6f.	\$	0.00
6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	\$	16,748.00
	6b. 6c. 6d. 6e. 6f.	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6h.	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6b. \$ \$ 6c. \$ 6d. \$ 6d. \$ 6e. \$ 6g. \$ 6g. \$ 6g. \$ 6h. \$

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Page 25 of 48 Case number (if known) Debtor 1 Quincy D. Rollins

Total Nonpriority. Add lines 6f through 6i.

16,748.00

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Fill in this infor	mation to identify your	case:			
Debtor 1	Quincy D. Rollins	5			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
Case number (if known)				_	7 Chaple if this is an
(ii kilowii)				L	Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Cricket Wireless	Cell phone contract ASSUME

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		Docume	nt Page 27 of 48	
Fill in thi	s information to identify your	case:		
Debtor 1	Quincy D. Rollins	•		
DCDIOI 1	First Name	Middle Name	Last Name	 -
Debtor 2				
(Spouse if, f	ling) First Name	Middle Name	Last Name	
United St	ates Bankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
_				
Case nur (if known)	nber			☐ Check if this is an
(amended filing
Officia	al Form 106H			
		abtera		
scne	dule H: Your Cod	eptors		12/15
ill it out, our nam	and number the entries in the e and case number (if known	boxes on the left. Attach . Answer every question.	the Additional Page to this page. O	pace is needed, copy the Additional Page, n the top of any Additional Pages, write
	.			
■ Ye				
	55			
			operty state or territory? (Community erto Rico, Texas, Washington, and Wis	y property states and territories include sconsin.)
■ No	o. Go to line 3.			
	es. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?	
		, 0 1	,	
in lir Forn	e 2 again as a codebtor only i	f that person is a guarant	tor or cosigner. Make sure you have	e is filing with you. List the person shown listed the creditor on Schedule D (Official edule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		: The creditor to whom you owe the debt schedules that apply:
3.1	Betty Bitts , friend		☐ Sched	lule D, line
	1913 Willis Road		■ Sched	lule E/F, line 4.1
	North Chesterfield, VA 23	237	☐ Sched	
			Connect	s Federal Credit Union
3.2	Betty Bitts, friend		☐ Sched	lule D, line
	1913 Willis Road	227	■ Sched	lule E/F, line 4.3
	North Chesterfield, VA 23	231		ule G
				Street Development 3

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Fill	in this information to ide	entify your ca	ase:				I				
		uincy D. R									
	otor 2					_					
Uni	ted States Bankruptcy (Court for the	EASTERN DISTRICT	OF VIRGINIA							
	se number 						□ A		ed filing ent showin	g postpetition	
0	fficial Form 10	<u> </u>					N	/IM / DD/ \	YYYY		
S	chedule I: Yo	ur Inc	ome								12/15
spo atta	use. If you are separat	ted and you this form. (are married and not filii r spouse is not filing wi On the top of any additi	th you, do not inclu	ıde infor	mati	on abou	t your spo umber (if	ouse. If mo known). A	ore space is	needed,
	If you have more than	one ioh		■ Employed				☐ Empl		3 -1	
	attach a separate pag information about add	e with	Employment status	☐ Not employed					mployed		
	employers.		Occupation	Self-employed	Detailer						
	Include part-time, sea self-employed work.	sonal, or	Employer's name	RC Auto Finish	l						
	Occupation may incluor homemaker, if it ap		Employer's address								
Par	rt 2: Give Details	About Mor	How long employed to	here? Februa	ry 2019	l		_			
Esti spou	mate monthly income use unless you are sepa	as of the da	ate you file this form. If	·	·		·		·	·	J
-	e space, attach a separa					•	,				,
							For Del	btor 1		btor 2 or ng spouse	
2.			ry, and commissions (becalculate what the monthle		2.	\$		0.00	\$	N/A	
3.	Estimate and list mo	onthly overti	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Inco	me. Add lir	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

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Deb	tor 1	Quincy D. Rollins	_	Case	e number (if known)			
				Fo	r Debtor 1		Debtor 2 or	
	Con	y line 4 here	4.	\$	0.00	non-	filing spouse N/A	
	ООР	y line 4 nere	٦.	Ψ_	0.00	Ψ	IV/A	-
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	•
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	-
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	•
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$_	0.00	+ \$	N/A	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ __	0.00	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	1,100.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	:					
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$-	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,100.00	\$	N/A	<u> </u>
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$		1,100.00 + \$		N/A = \$	1,100.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						1,100100
11.	Incluothe	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not cify:	depen		. ,	•	chedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaies					12. \$	1,100.00
							Combin	
13.	Dov	ou expect an increase or decrease within the year after you file this form	?				monthly	y income
	—	No.	•					
		Yes. Explain: See Schedule J						
	_							

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Fill	in this informa	tion to identify yo	our çase:					
Deb		Quincy D. Re				Che	ck if this is:	
Dob	tor 2						An amended filing	uina nootnotition aboutor
	ouse, if filing)						13 expenses as of	ving postpetition chapter the following date:
Unite	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF VIRGIN	IIA		MM / DD / YYYY	
1	e number nown)							
Of	ficial Fo	rm 106J						
		J: Your	Exper	ises				12/1
Be a	as complete a	and accurate as	possible eded, atta	If two married people ar ch another sheet to this	e filing together, be form. On the top of	oth are equ f any addition	ally responsible fo onal pages, write y	or supplying correct your name and case
Part		ibe Your House	hold					
1.	Is this a joir No. Go to							
			in a separ	ate household?				
	□N	0	•					
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	tor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						□ Yes □ No
								☐ Yes
								□ No
								☐ Yes
								□ No
0	D		_					☐ Yes
3.		enses include f people other t	han	No				
		d your depende		Yes				
Part	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses				
exp				uptcy filing date unless y y is filed. If this is a supp				
the		n assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses
,		,						
4.		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgag	e 4. \$	S	200.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$	S	0.00
		rty, homeowner's				4b. \$		0.00
				ipkeep expenses		4c. \$		0.00
5.		owner's associat nortgage payme		dominium dues our residence, such as ho	me equity loans	4d. § 5. §		0.00

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Deb	otor 1	Quincy D. Rollins	Case num	ber (if known)	
6.	Utilit	ies:			
	6a.	Electricity, heat, natural gas	6a.	\$	0.00
	6b.	Water, sewer, garbage collection	6b.	\$	0.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
	6d.	Other. Specify:	6d.	\$	0.00
7.	Food	d and housekeeping supplies	7.	\$	369.00
8.	Child	dcare and children's education costs	8.	\$	0.00
9.	Cloth	ning, laundry, and dry cleaning	9.	\$	40.00
10.	Pers	onal care products and services	10.	\$	20.00
11.	Medi	ical and dental expenses	11.	\$	30.00
12.	Tran	sportation. Include gas, maintenance, bus or train fare.			450.00
		ot include car payments.	12.	·	152.00
		rtainment, clubs, recreation, newspapers, magazines, and books	13.	· -	100.00
		itable contributions and religious donations	14.	\$	0.00
15.		rance.			
		ot include insurance deducted from your pay or included in lines 4 or 20.	150	¢	0.00
		Life insurance	15a.	· <u> </u>	0.00
		Health insurance	15b.		0.00
		Vehicle insurance	15c.	\$	0.00
40		Other insurance. Specify:	15d.	\$	0.00
	Spec		16.	\$	0.00
17.		illment or lease payments:		•	
		Car payments for Vehicle 1	17a.		0.00
		Car payments for Vehicle 2		·	0.00
	1/c.	Other. Specify: Misc. Expenses	17c.	\$	100.00
	17d.	Other. Specify: Tolls	17d.	· -	20.00
		Anticipated car payment and vehicle upkeep		\$	300.00
18.		payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
10		acted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Fr payments you make to support others who do not live with you.	10.	\$	
19.	Spec	• • • • • • • • • • • • • • • • • • • •	19.	Ψ	0.00
20		er real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e		our Income	
20.		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.		0.00
		Property, homeowner's, or renter's insurance	20c.	·	0.00
		Maintenance, repair, and upkeep expenses	20d.		0.00
		Homeowner's association or condominium dues	20e.	·	0.00
21.		r: Specify:		+\$	0.00
۷1.	Othic			Γ	0.00
22.	Calc	ulate your monthly expenses			
		Add lines 4 through 21.		\$	1,331.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	1,331.00
23.		ulate your monthly net income.			
		Copy line 12 (your combined monthly income) from Schedule I.	23a.		1,100.00
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	1,331.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-231.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

☐ Yes.

Explain here: The Debtor does not anticipate any changes to income or expenses. Household size of two. Debtor lives with his girlfriend and contributes approximately \$200/month for ent and utilities. Her expenses are not listed on Schedule J.

Debtor just started in car detailing business in February 2019. He has not had a full year of income & expenses but he anticipates that he will gross approx\$1,500/month. His business is a seasonal business, so his income in the winter months will be much lower.

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Fill in this infor	mation to identify your	case:			
Debtor 1	Quincy D. Rollins	•			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF	F VIRGINIA		
Case number					
(if known)					Check if this is an amended filing
If two married p You must file th obtaining mone years, or both. 1	eople are filing together	n connection with a bank	nsible for supplying cor		
Did you pa	ay or agree to pay some	one who is NOT an attorr	ney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes.	Name of person				Petition Preparer's Notice, ignature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sumr	mary and schedules file	ed with this declaration and	
X /s/ Qu	incy D. Rollins		X		
Quinc	y D. Rollins		Signature of	Debtor 2	
Signatu	ire of Debtor 1				
Date	March 14, 2019		Date		

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Debtor 1	Quincy D. Rollins	S		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF V	IRGINIA	
Case number _				☐ Check if this is an amended filing
e as complete	t of Financial A	ole. If two married people are	uals Filing for Bankrupto e filing together, both are equally respo is form. On the top of any additional pa	onsible for supplying correct
Part 1: Give	Details About Your Mar	ital Status and Where You L	ived Before	
. What is you	ur current marital status	5?		
☐ Married ■ Not ma				
■ Not ma	arried	ived anywhere other than w	nere you live now?	
Not ma	arried last 3 years, have you li	ived anywhere other than w	•	
■ Not ma During the No ■ Yes. Li	arried last 3 years, have you li	·	•	Dates Debtor 2 lived there
■ Not ma During the No ■ Yes. Li	arried last 3 years, have you liverst all of the places you liversor Address:	ved in the last 3 years. Do not Dates Debtor 1	include where you live now.	
■ Not ma During the No ■ Yes. Li Debtor 1 P 7102 Ferr Henrico, V	arried last 3 years, have you liverst all of the places you liversor Address:	ved in the last 3 years. Do not Dates Debtor 1 lived there From-To:	include where you live now. Debtor 2 Prior Address:	lived there ☐ Same as Debtor 1
■ Not ma During the No ■ Yes. Li Debtor 1 P 7102 Ferr Henrico, V	arried last 3 years, have you livers all of the places you livers address: nwood St VA 23228 ranklin Street d, VA 23223	Dates Debtor 1 lived there From-To: 2/2018 - 8/2018	Debtor 2 Prior Address:	lived there ☐ Same as Debtor 1 From-To: ☐ Same as Debtor 1

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Debtor 1 Quincy D. Rollins

Pa	rt 2 Exp	lain the Sources of You	ır Income			
4.	Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.					
	□ No					
	Yes.	Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:			☐ Wages, commissions, bonuses, tips	\$3,466.77	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	
For last calendar year: (January 1 to December 31, 2018)			☐ Wages, commissions, bonuses, tips	\$661.97	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2017)			☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	
5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details.					
			Debtor 1	0	Debtor 2	0
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Pa	rt 3: List	: Certain Payments You	Made Before You Filed for	Bankruptcy		
6.	Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?					
	☐ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a to paid that creditor. Do not include payments for					
		not include	payments to an attorney for the	his bankruptcy case.	or after the date of adjustment	•

Page 35 of 48 Case number (if known) Quincy D. Rollins Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address **Dates of payment** Total amount Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П Nο Yes. Fill in the details. Nature of the case Status of the case Case title Court or agency Case number Connects Federal Credit Union v. Warrant in Debt **Henrico General District** □ Pending Quincy D. Rollins Court □ On appeal GV18024344-00 4301 East Parham Road Concluded Henrico, VA 23228 Judgment on December 21, 2018 Franklin Street Development 3 LLC Richmond GD Civil Interrogatory Pending v. Quincy Rollins John Marshall Courts Bldg ☐ On appeal GV18005109-02 400 N. 9th Street ☐ Concluded Richmond, VA 23219 Pending hearing on March 18, 2019

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Debtor 1

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Document

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Doc 1

lien.

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Case number (if known) Debtor 1 Quincy D. Rollins

Pa	tt 7: List Certain Payments or Transfers							
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.							
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred		Date payment or transfer was made	Amount of payment			
	North Law Bar# 29672 5913 Harbour Park Drive Midlothian, VA 23112 www.pianorth.com	iling fee, g, due ation, ority mail	due tion,					
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.							
	Person Who Was Paid Address	Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment			
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.							
	Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and value of property transferred		any property or received or debts change	Date transfer was made			
	Person's relationship to you							
	None	There have been NO transfers of property in the last three years.						
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No Yes. Fill in the details.		elf-settled tru	ıst or similar device	of which you are a			
	Name of trust	Description and value of the prope	erty transferro	ed	Date Transfer was made			

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Pa	t 8: List of Certain Financial Accounts, In	nstruments, Safe Depos	sit Boxes, and S	Storage Un	its	
20.	Within 1 year before you filed for bankrupte sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso □ No	or other financial acco	unts; certificate	s of depo		, ,
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Union First Market Bank PO Box 940 Ruther Glen, VA 22546	XXXX-	■ Checking □ Savings □ Money Ma □ Brokerage □ Other		2018; Account was negative	\$0.00
	Capital One Bank P.O. Box 85147 Richmond, VA 23276	xxxx-		□ Savings account, but paid the fees and closed the account.		\$0.00
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	year before you filed for the second of the	ccess to it?		eposit box or other depos	Do you still have it?
22.	Have you stored property in a storage unit No		ur home within	1 year bef	ore you filed for bankrup	tcy?
	☐ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describ	e the contents	Do you still have it?
Pai	t 9: Identify Property You Hold or Contro	I for Someone Else				
23.	for someone.	omeone else owns? Inc	clude any prope	erty you bo	prowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describ	e the property	Value

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Case number (if known) Document

Debtor 1 Quincy D. Rollins

Part 10: Give Details About Environmental Information

Case 19-31368-KLP

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

	hazardous material means anything an environmental law defines as a nazardous waste, nazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.							
Rep	port all notices, releases, and proceedin	ngs that you know about, regardless of when	n they occurred.					
24.	Has any governmental unit notified yo	ou that you may be liable or potentially liable	under or in violation of an environment	al law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP C	Governmental unit Address (Number, Street, City, State an ZIP Code)	, , ,	Date of notice				
25.	Have you notified any governmental u							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP C	Governmental unit Address (Number, Street, City, State an ZIP Code)		Date of notice				
26.	Have you been a party in any judicial of	or administrative proceeding under any env	ironmental law? Include settlements and	l orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)		Status of the case				
Pai	art 11: Give Details About Your Busine	ess or Connections to Any Business						
27.	Within 4 years before you filed for ban	nkruptcy, did you own a business or have ar	ny of the following connections to any b	usiness?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	■ A member of a limited liability	company (LLC) or limited liability partnersh	nip (LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managi	ing executive of a corporation						
	☐ An owner of at least 5% of the	voting or equity securities of a corporation						
	☐ No. None of the above applies. G	lo. None of the above applies. Go to Part 12.						
	Yes. Check all that apply above a	and fill in the details below for each busines:	s.					
Part 27. V	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number	mber or ITIN.				
		rame of accountant of bookkeeper	Dates business existed					
	RC Auto Finish LLC 1913 Willis Rd Richmond, VA 23237	Car detailing services	EIN: From-To Febraury 2019 to cur	rent				

Page 40 of 48 Case number (if known) Document Debtor 1 Quincy D. Rollins 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. **Date Issued** Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Quincy D. Rollins Signature of Debtor 2 **Quincy D. Rollins** Signature of Debtor 1 Date March 14, 2019 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your	case:		
Debtor 1	Quincy D. Rollins			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	EASTERN DISTR	IICT OF VIRGINIA	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official For				_
Statemen	<u>it of Intentio</u>	n for Indiv	<u>riduals Filing Under Cha</u> j	oter 7 12/15
If you are an indiv	vidual filing under cha	oter 7. vou must fil	Lout this form if	
	claims secured by yo			
	ed personal property a			
			you file your bankruptcy petition or by the date time for cause. You must also send copies t	
on the f	orm			
	ople are filing together d date the form.	in a joint case, bo	th are equally responsible for supplying corre	ect information. Both debtors must
•				
	ind accurate as possib our name and case nun		s needed, attach a separate sheet to this form.	On the top of any additional pages,
Dort 1: Lint Vo	Craditara Wha Hayr	Secured Claims		
	ur Creditors Who Have			
1. For any credito information be	-	ert 1 of Schedule D	: Creditors Who Have Claims Secured by Prop	perty (Official Form 106D), fill in the
Identify the cre	ditor and the property th	nat is collateral	What do you intend to do with the property secures a debt?	that Did you claim the property as exempt on Schedule C?
	ffirm Inc		Surrender the property.	□ No
name:			☐ Retain the property and redeem it. ☐ Retain the property and enter into a	■ Yes
Description of	Custom Rims, Tire		Reaffirmation Agreement.	
property	exhaust pipe. Car repossessed by Co		☐ Retain the property and [explain]:	
securing debt.	Federal Credit Unio			
	no longer has possivehicle.	session of the		
	venicie.			
	ur Unexpired Persona			
in the information	n below. Do not list rea	l estate leases. Un	in Schedule G: Executory Contracts and Une expired leases are leases that are still in effect	et; the lease period has not yet ended.
You may assume	an unexpired persona	I property lease if t	the trustee does not assume it. 11 U.S.C. § 365	5(p)(2).
Describe your u	nexpired personal prop	perty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of lea	sed			_
Property:				☐ Yes
Lessor's name:				□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Quincy D. Rollins	Case number (if known)
Description of leased Property:	☐ Yes
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Part 3: Sign Below	□ Yes
Under penalty of perjury, I declare that I have indicated my intention about a property that is subject to an unexpired lease.	any property of my estate that secures a debt and any personal
X /s/ Quincy D. Rollins Quincy D. Rollins Signature of Debtor 1	Signature of Debtor 2
Date March 14, 2019 Date	

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Document Page 43 of 48 United States Bankruptcy Court

Eastern	District	of Vir	ginia

In re	Quincy D. Rollins		Case No.	
		Debtor(s)	Chapter	7

	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and tha compensation paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept \$ 1,116.30
	Prior to the filing of this statement I have received \$ 1,116.30
	Balance Due \$ 0.00
2.	The source of the compensation paid to me was:
	■ Debtor \square Other (specify)
3.	The source of compensation to be paid to me is:
	■ Debtor \square Other (specify)
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Other provisions as needed:
6.	By agreement with the debtor(s), the above-disclosed fee does not include the following services: Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522 for avoidance of liens.
	Representation for above-referenced fees are subject to firm's effective hourly rates or a percentage of recovery if additional legal services are required such as attendance of continued hearings, additional notices to creditors, negotiations, settlements, filing Motions or Adversarial Proceedings and additional legal research.

Representation of the debtors in any motions, dischargeability actions, judicial lien avoidances, redemption, reaffirmation, relief from stay actions, adversary proceedings, actions for sanctions and civil contempt due to creditor misconduct, actions to avoid Judicial liens, Adversary Proceedings, negotiations or actions to avoid Preferential Transfers, actions in any appeals court including the Virginia Court of Appeals, the Supreme Court of Virginia and the United States Supreme Court.

Case 19-31368-KLP Doc 1 Filed 03/14/19 Entered 03/14/19 17:54:45 Desc Main Document Page 44 of 48 CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

March 14, 2019	/s/ Pia J. North
Date	Pia J. North 29672
	Signature of Attorney

North Law Bar# 29672

Name of Law Firm 5913 Harbour Park Drive Midlothian, VA 23112 (804) 739-3700 Fax: (804) 739-2550

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			_			
Fill ir	n this information to identify your case:				directed in this form and	d in Form
Debt	or 1 Quincy D. Rollins		122	2A-1Supp:		
Debt (Spou	or 2 se, if filing)			■ 1. There is no pre	sumption of abuse	
Unite	ed States Bankruptcy Court for the: Eastern Distric	ct of Virginia		applies will be	to determine if a presumade under <i>Chapter 7</i>	•
	e number			Calculation (O	fficial Form 122A-2).	
(if kno	wn)				st does not apply now be ry service but it could ap	
			ľ	☐ Check if this is	an amended filing	
Off	icial Form 122A - 1					
Ch	apter 7 Statement of Your C	urrent Monthl	y Inc	ome		12/15
attach case i	complete and accurate as possible. If two married peon a separate sheet to this form. Include the line number number (if known). If you believe that you are exempted ying military service, complete and file Statement of Example Calculate Your Current Monthly Income	to which the additional info d from a presumption of abus	rmation a	pplies. On the top of se you do not have pr	any additional pages, wri	te your name and or because of
1.	What is your marital and filing status? Check on	e only.				
	■ Not married. Fill out Column A, lines 2-11.					
	\square Married and your spouse is filing with you. F	ill out both Columns A and	B, lines	2-11.		
	\square Married and your spouse is NOT filing with y	ou. You and your spouse	are:			
	☐ Living in the same household and are not	legally separated. Fill out	both Col	umns A and B, lines	2-11.	
	☐ Living separately or are legally separated. penalty of perjury that you and your spouse a living apart for reasons that do not include ev	are legally separated under	r nonbanl	kruptcy law that app	lies or that you and you	
10 the	Il in the average monthly income that you received from 1(10A). For example, if you are filing on September 15, the e 6 months, add the income for all 6 months and divide the ouses own the same rental property, put the income from the	6-month period would be Mar total by 6. Fill in the result. Do	rch 1 throu not includ	igh August 31. If the an	nount of your monthly incommore than once. For examp	ne varied during ble, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overting payroll deductions).	ne, and commissions (be	ofore all	\$	\$	
3.	Alimony and maintenance payments. Do not incl Column B is filled in.	ude payments from a spou	ise if	\$ 0.00	\$	
	All amounts from any source which are regularl of you or your dependents, including child supp from an unmarried partner, members of your house and roommates. Include regular contributions from filled in. Do not include payments you listed on line	port. Include regular contril shold, your dependents, pa a spouse only if Column B	butions rents,	\$ 0.00	\$	
5.	Net income from operating a business, professi					
		Debtor 1				
	Gross receipts (before all deductions)	\$ 688.12 -\$ 254.74				
	Ordinary and necessary operating expenses	·	Сору			
	Net monthly income from a business, profession, or farm	\$ 433.38	here -> S	\$ 433.38	\$	
6.	Net income from rental and other real property	Debtor 1				
	Gross receipts (before all deductions)	\$ 0.00				
	Ordinary and necessary operating expenses	-\$ 0.00	_		_	
	Net monthly income from rental or other real proper	rty \$ <u>0.00</u> Copy	here ->		\$	
7.	Interest, dividends, and royalties			\$ 0.00	\$	

Official Form 122A-1

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Debtor 1	Quincy D. Rollins		Case number (if known)	

				Column A Debtor 1		Column B Debtor 2 or non-filing sp	
8.	Unemployment compensation			\$	0.00	\$	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	nt received was a benef	it under				_
	For you	\$0.0	00				
	For your spouse	\$					
	Pension or retirement income. Do not include any a benefit under the Social Security Act.			\$	0.00	\$	
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against he domestic terrorism. If necessary, list other sources on total below.	Security Act or paymen umanity, or international	ts or				
	•			\$	0.00	\$	
				\$	0.00	\$	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	
11.	Calculate your total current monthly income. Add I each column. Then add the total for Column A to the t		\$	433.38	+		= \$ 433.38
					J L		Total current monthly
Part	2: Determine Whether the Means Test Applies	to You					income
12.	Calculate your current monthly income for the yea	r. Follow these steps:					
	12a. Copy your total current monthly income from line	11		Сору	line 11 h	ere=>	\$433.38
	Multiply by 12 (the number of months in a year)						x 12
	12b. The result is your annual income for this part of the	he form				12b.	\$5,200.56
13.	Calculate the median family income that applies to	you. Follow these step	s:				
	Fill in the state in which you live.	VA					
	Fill in the number of people in your household.	2					
	Fill in the median family income for your state and size	***************************************				13.	\$76,047.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the ban	o online using the link sp kruptcy clerk's office.	pecified	in the separa	te instruct	ions	
14.	How do the lines compare?						
	Line 12b is less than or equal to line 13. 0Go to Part 3.	On the top of page 1, ch	eck box	1, There is r	no presum	ption of abuse).
	14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	The pre	esumption of	abuse is o	determined by	Form 122A-2.
Part	3: Sign Below						
	By signing here, I declare under penalty of perjur	ry that the information or	n this sta	atement and	in any atta	chments is tru	ue and correct.
	χ /s/ Quincy D. Rollins						
	Quincy D. Rollins Signature of Debtor 1						
	Date March 14, 2019						
	MM / DD / YYYY If you checked line 14a, do NOT fill out or file For	rm 122∆-2					
	If you checked line 14b, fill out Form 122A-2 and	me it with this form.					

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Debtor 1 Quincy D. Rollins Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 09/01/2018 to 02/28/2019.

Line 5 - Income from operation of a business, profession, or farm

Source of Income: RC Auto Finish LLC

Income/Expense/Net by Month:

_	Date	Income	Expense	Net
6 Months Ago:	09/2018	\$0.00	\$185.00	\$-185.00
5 Months Ago:	10/2018	\$248.71	\$40.00	\$208.71
4 Months Ago:	11/2018	\$0.00	\$413.00	\$-413.00
3 Months Ago:	12/2018	\$413.26	\$562.44	\$-149.18
2 Months Ago:	01/2019	\$1,051.63	\$288.00	\$763.63
Last Month:	02/2019	\$2,415.14	\$40.00	\$2,375.14
_	Average per month:	\$688.12	\$254.74	
			Average Monthly NET Income:	\$433.38

TransUnionCase 19-31368-KLP P.O. Box 2000 Chester, PA 19022

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Union First Market Bank PO Box 940 Ruther Glen, VA 22546

ChexSystems Attn: Consumer Relations 7805 Hudson Rd., Suite 100 Saint Paul, MN 55125

Dodson Property Management 409 E Main St, Ste 301 Richmond, VA 23219

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Experian Dispute Department P.O. Box 4500 Allen, TX 75013

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